2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2000 8:00 am
Secretary of State
04-12-2000 90128 001 ***211.25

DOCUMENT # V10386

1. Entity Name

THE SHORES GROUP, INC.

Principal Place of Business	Mailing Address
2617 S. ATLANTIC AVENUE DAYTONA BEACH SHORES FL 32118	2617 S. ATLANTIC AVENUE DAYTONA BEACH SHORES FL 32118-5605

7419

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3165183 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOSTETTLER, JAKE 2617 SOUTH ATLANTIC AVENUE DAYTONA BEACH SHORES FL 32118	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WALKER, GRACE 2600 REED AVENUE TITUSVILLE FL 32901	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT Jim Weber P.O. Box 301 Oklawaha FL 32183	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD JOSEY, ROBERT P.O. BOX 60216 JACKSONVILLE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Vernon White 73 Knight Box Rd. Orange Park FL 32065	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LAWRENCE, DORIS 3800 IBIS DRIVE ORLANDO FL 32803	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Ernest Witt 1319 Blanche St. Malabar, FL 32950	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HOSTETTLER, JAKE 2617 S. ATLANTIC AVENUE DAYTONA BEACH SHORES FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Joanne Clark 820 Galsworthy Ave Orlando FL 32809	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOYAL, PAUL 2582 BERNICE COURT MELBOURNE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT ROBERT JOSEY P.O. Box 60216 JACKSONVILLE FL 32236	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jake Hostettler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 4, 2000
Date

Daytime Phone #